us—and other readers—whether gender independently influenced clinical outcome.

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REPLY

We would like to thank Dr. Poulsen and colleagues for their interest in our study (1). The prevalence of female gender with or without creatine kinase-myocardial band (CK-MB) elevation after percutaneous coronary intervention (PCI) was not different between the two groups (31.1% vs. 21.7%; p = 0.22). Gender was entered in the multivariate analysis, and it turned out not to be an independent predictor of CK-MB elevation.

Women undergoing balloon angioplasty had a higher incidence of early adverse cardiac events in both early (2) and contemporary series (3). In the current era of predominant stent implantation for PCI, mixed results have been demonstrated (4–6). However, our data concur with recent studies specifically addressing post-PCI myonecrosis, in which female gender is not demonstrated to be an independent correlate of post-PCI myonecrosis (7–9).

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